B6A (Official Form 6A) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
714 E. 39th St., Houston, TX 77022 LT 6 and LT 7 BLK 65 INDEPENDENCE HEIGHTS PARK, HARRIS COUNTY, TX	Homestead	-	$101,034.00	$66,417.39
		Total:	**$101,034.00**	

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE B - PERSONAL PROPERTY

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		First Convenience Bank- Checking	-	$0.00
		First Convenience Bank- Savings	-	$0.00
		Med Tran Credit Union- Checking	-	$0.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.		Sofa	-	$1,000.00
		Love Seat	-	$1,000.00
		Coffee Table	-	$375.00
		DVD Player	-	$100.00
		Lamp	-	$50.00
		Entertaniment Center	-	$250.00
		3 Rugs	-	$75.00
		3 TV's	-	$1,000.00
		2 Stereos	-	$150.00
		2 Kitchen Table w/chairs	-	$250.00
		Flatware	-	$125.00
		Pots & Pans	-	$300.00
		Dishes & Glasses	-	$50.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		3 Beds	-	$300.00
		Chest	-	$150.00
		3 Dressers	-	$400.00
		4 Night Stands	-	$150.00
		2 Lamps	-	$200.00
		TV Stand	-	$300.00
		Refrigerator	-	$230.00
		Dish Washer	-	$40.00
		2 Washers	-	$225.00
		Dryer	-	$225.00
		Microwave	-	$100.00
		Vacuum Cleaner	-	$100.00
		Computer	-	$80.00
		Tools	-	$20.00
		Patio Furniture	-	$375.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books	-	$40.00
		2 Mirrors	-	$200.00
6. Wearing apparel.		Clothing & Shoes	-	$350.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **LaMonica Bene McCray**

Case No. **15-33582-H4-13**
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
7. Furs and jewelry.		Watch	-	$50.00
		Costume Jewelry	-	$100.00
8. Firearms and sports, photo-graphic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Life Ins	-	$1.00
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Retirement Plan	-	$3,000.00
13. Stock and interests in incorpo-rated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	**X**			
16. Accounts receivable.	**X**			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.		Child Support Arrears owed to debtor	-	$7,680.00
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	**X**			
19. Equitable or future interests, life estates, and rights or powers exercis-able for the benefit of the debtor other than those listed in Schedule A - Real Property.	**X**			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	**X**			
21. Other contingent and unliqui-dated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	**X**			
22. Patents, copyrights, and other intellectual property. Give particulars.	**X**			

B6B (Official Form 6B) (12/07) -- Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 4

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
23. Licenses, franchises, and other general intangibles. Give particulars.	**X**			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	**X**			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2007 Chevrolet Impala Mileage: 60,000	-	$8,574.50
26. Boats, motors, and accessories.	**X**			
27. Aircraft and accessories.	**X**			
28. Office equipment, furnishings, and supplies.	**X**			
29. Machinery, fixtures, equipment, and supplies used in business.	**X**			
30. Inventory.	**X**			
31. Animals.	**X**			
32. Crops - growing or harvested. Give particulars.	**X**			
33. Farming equipment and implements.	**X**			

B6B (Official Form 6B) (12/07) -- Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 5

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

5 continuation sheets attached

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Total > **$27,615.50**

B6C (Official Form 6C) (4/13)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

☐ 11 U.S.C. § 522(b)(2)
☑ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds $155,675.*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
714 E. 39th St., Houston, TX 77022 LT 6 and LT 7 BLK 65 INDEPENDENCE HEIGHTS PARK, HARRIS COUNTY, TX	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002	$34,616.61	$101,034.00
Sofa	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$1,000.00	$1,000.00
Love Seat	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$1,000.00	$1,000.00
Coffee Table	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$375.00	$375.00
DVD Player	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$100.00	$100.00
Lamp	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$50.00	$50.00
Entertaniment Center	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$250.00	$250.00
3 Rugs	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$75.00	$75.00
3 TV's	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$1,000.00	$1,000.00
		$38,466.61	**$104,884.00**

** Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

B6C (Official Form 6C) (4/13) -- Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 1

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
2 Stereos	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$150.00	$150.00
2 Kitchen Table w/chairs	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$250.00	$250.00
Flatware	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$125.00	$125.00
Pots & Pans	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$300.00	$300.00
Dishes & Glasses	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$50.00	$50.00
3 Beds	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$300.00	$300.00
Chest	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$150.00	$150.00
3 Dressers	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$400.00	$400.00
4 Night Stands	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$150.00	$150.00
2 Lamps	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$200.00	$200.00
TV Stand	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$300.00	$300.00
Refrigerator	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$230.00	$230.00
Dish Washer	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$40.00	$40.00
		$41,111.61	**$107,529.00**

B6C (Official Form 6C) (4/13) -- Cont.

In re **LaMonica Bene McCray**

Case No. **15-33582-H4-13**
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 2

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
2 Washers	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$225.00	$225.00
Dryer	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$225.00	$225.00
Microwave	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$100.00	$100.00
Vacuum Cleaner	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$100.00	$100.00
Computer	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$80.00	$80.00
Tools	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$20.00	$20.00
Patio Furniture	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$375.00	$375.00
Books	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$40.00	$40.00
2 Mirrors	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	$200.00	$200.00
Clothing & Shoes	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(5)	$350.00	$350.00
Watch	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(6)	$50.00	$50.00
Costume Jewelry	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(6)	$100.00	$100.00
Life Ins	Tex. Ins. Code §§ 1108.001, 1108.051	$1.00	$1.00
		$42,977.61	**$109,395.00**

B6C (Official Form 6C) (4/13) -- Cont.

In re **LaMonica Bene McCray**

Case No. **15-33582-H4-13**
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 3

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Retirement Plan	Tex. Prop. Code § 42.0021	$3,000.00	$3,000.00
Child Support Arrears owed to debtor	Tex. Prop. Code § 42.001(b)(3)	$7,680.00	$7,680.00
2007 Chevrolet Impala Mileage: 60,000	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(9)	$0.00	$8,574.50
		$53,657.61	**$128,649.50**

B6D (Official Form 6D) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13** (if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: **xxxxxxxxx0941** **Chevy Chase Fed Sav Ba** **Capital One/Attn:Bankruptcy** **PO Box 30285** **Salt Lake City, UT 84130**		-	DATE INCURRED: **06/2010** NATURE OF LIEN: **First Mortgage Lien** COLLATERAL: **Homestead** REMARKS: VALUE: **$101,034.00**				**$57,584.00**	
ACCT #: **Chevy Chase Fed Sav Ba** **Capital One/Attn:Bankruptcy** **PO Box 30285** **Salt Lake City, UT 84130**		-	DATE INCURRED: NATURE OF LIEN: **First Mortgage Lien** COLLATERAL: **Arrears** REMARKS: VALUE: **$101,034.00**				**$7,000.00**	
ACCT #: **Harris County** **Mike Sullivan - Tax Assessor** **P. O. Box 4622** **Houston, Tx 77210-4622**		-	DATE INCURRED: NATURE OF LIEN: **Property Tax Lien** COLLATERAL: **Homestead- Property Taxes (Escrowed)** REMARKS: VALUE: **$101,034.00**				**$1,833.39**	
ACCT #: **xxxx4448** **Western Funding Inc** **3915 E Patrick Ln** **Las Vegas, NV 89120**		-	DATE INCURRED: **05/2014** NATURE OF LIEN: **Car Lien** COLLATERAL: **2007 Chevrolet Impala** REMARKS: VALUE: **$8,574.50**				**$8,716.00**	**$141.50**
			Subtotal (Total of this page) >				**$75,133.39**	**$141.50**
			Total (Use only on last page) >				**$75,133.39**	**$141.50**
							(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

_______**No**_______ continuation sheets attached

B6E (Official Form 6E) (04/13)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to $12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**
Claims of certain farmers and fishermen, up to $6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**
Claims of individuals up to $2,775* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☑ **Taxes and Certain Other Debts Owed to Governmental Units**
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

☑ **Administrative allowances under 11 U.S.C. Sec. 330**
Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

** Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

2 continuation sheets attached

B6E (Official Form 6E) (04/13) - Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

TYPE OF PRIORITY	Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: **Internal Revenue Service** **Centralized Insolvency Operation** **P.O. Box 7346** **Philadelphia, PA 19101-7346**		-	DATE INCURRED: CONSIDERATION: **1040 Taxes** REMARKS:				**$800.00**	**$800.00**	**$0.00**

Sheet no. 1 of 2 continuation sheets attached to Schedule of Creditors Holding Priority Claims

	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Subtotals (Totals of this page) >	**$800.00**	**$800.00**	**$0.00**
Total > **(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)**			
Totals > **(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)**			

B6E (Official Form 6E) (04/13) - Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

TYPE OF PRIORITY	Administrative allowances

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: **Keeling Law Firm** **3310 Katy Freeway** **Suite 200** **Houston, Texas 77007**		-	DATE INCURRED: **07/06/2015** CONSIDERATION: **Attorney Fees** REMARKS:				**$3,718.00**	**$3,718.00**	**$0.00**
ACCT #: **Keeling Law Firm** **3310 Katy Freeway** **Suite 200** **Houston, Texas 77007**		-	DATE INCURRED: CONSIDERATION: **Attorney Fees** REMARKS:				**$100.00**	**$100.00**	**$0.00**

Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Priority Claims **Subtotals (Totals of this page) >**	**$3,818.00**	**$3,818.00**	**$0.00**
Total > **(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)**	**$4,618.00**		
Totals > **(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)**		**$4,618.00**	**$0.00**

B6F (Official Form 6F) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13** (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: **xxx5197** **Ad Astra Rec** **8918 W 21st St. N Suite 200** **Mailbox: 112** **Wichita, KS 67205**		-	DATE INCURRED: **09/2013** CONSIDERATION: **Collecting for -SPEEDY CASH 77** REMARKS:				**$1,233.00**
ACCT #: **xxxxxxxx7467** **Chase auto** **Attn: National Bankruptcy Dept** **PO Box 29505** **Phoenix, AZ 85038**		-	DATE INCURRED: **03/2012** CONSIDERATION: **Automobile - Deficiency Balance** REMARKS: **Nissan Altima - deficiency balance**				**$18,000.00**
ACCT #: **xxxxxxx02N1** **Commonwealth Financial** **245 Main Street** **Scranton, PA 18519**		-	DATE INCURRED: **01/2013** CONSIDERATION: **Collecting for -ACS PRIMARY CARE PHYS SW PA** REMARKS:				**$182.00**
ACCT #: **xxxx4290** **Credit Collections Svc** **PO Box 773** **Needham, MA 02494**		-	DATE INCURRED: CONSIDERATION: **Collecting for -06 PROGRESSIVE INSURANCE COM** REMARKS:				**$340.00**
ACCT #: **xxxx9983** **First National Bank** **Po Box 937** **Killeen, TX 76540**		-	DATE INCURRED: **02/12/2015** CONSIDERATION: **Unsecured** REMARKS:				**$406.00**
ACCT #: **7794** **Indpndnt Dlr** **8866 Gulf Freeway** **Houston, TX 77017**		-	DATE INCURRED: **05/10/2014** CONSIDERATION: **Automobile** REMARKS:				**$10,423.00**
						Subtotal >	**$30,584.00**
						Total >	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

1 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13** (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: **xxxxxx0002** **Met Tran Fcu** **2150 West 18th St** **Houston, TX 77008**		-	DATE INCURRED: **05/21/2015** CONSIDERATION: **Unsecured** REMARKS:				**$501.00**
ACCT #: **xxxxxx0905** **Midland Funding** **8875 Aero Dr Ste 200** **San Diego, CA 92123**		-	DATE INCURRED: **01/2013** CONSIDERATION: **Collecting for -METABANK** REMARKS:				**$498.00**
ACCT #: **xxxxxxxxxxxx9219** **Public Savings Bank** **1601 Bryan St** **Dallas, TX 75201**		-	DATE INCURRED: **11/12/2009** CONSIDERATION: **Credit Card** REMARKS:				**$84.00**
ACCT #: **xxxx3954** **Stellar Recovery Inc** **4500 Salisbury Rd Ste 10** **Jacksonville, FL 32216**		-	DATE INCURRED: **02/2015** CONSIDERATION: **Collecting for -COMCAST** REMARKS:				**$137.00**
ACCT #: **xxxx4581** **Unique National Collec** **119 E Maple St** **Jeffersonville, IN 47130**		-	DATE INCURRED: **08/2012** CONSIDERATION: **Collecting for -HOUSTON PUBLIC LIBRARY** REMARKS:				**$67.00**
ACCT #: **xxxxxxx7401** **World Finance Corp** **World Acceptance Corp/Attn Bankruptcy** **PO Box 6429** **Greenville, SC 29606**		-	DATE INCURRED: **10/2003** CONSIDERATION: **Secured** REMARKS:				**Notice Only**

Sheet no. **1** of **1** continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > **$1,287.00**

Total > **$31,871.00**

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6G (Official Form 6G) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1	**LaMonica**	**Bene**	**McCray**
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**

Case number (if known) **15-33582-H4-13**

Check if this is:

☐ An amended filing

☐ A supplement showing post-petition chapter 13 income as of the following date:

____
MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	☑ Employed ☐ Not employed	☐ Employed ☐ Not employed
Occupation	**Bus Driver**	
Employer's name	**First Transit**	
Employer's address	**5555 Deauville Plaza** Number Street	Number Street
	Houston **TX** **77092** City State Zip Code	City State Zip Code
How long employed there?	**17 Years**	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write $0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	**$4,281.05**	
3. Estimate and list monthly overtime pay.	3. +	**$0.00**	
4. Calculate gross income. Add line 2 + line 3.	4.	**$4,281.05**	

Debtor 1 LaMonica Bene McCray — Case number (if known) 15-33582-H4-13
First Name / Middle Name / Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ➔	4.	$4,281.05	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	$304.55	
5b. Mandatory contributions for retirement plans	5b.	$0.00	
5c. Voluntary contributions for retirement plans	5c.	$0.00	
5d. Required repayments of retirement fund loans	5d.	$107.73	
5e. Insurance	5e.	$356.18	
5f. Domestic support obligations	5f.	$0.00	
5g. Union dues	5g.	$0.00	
5h. Other deductions. Specify: See continuation sheet	5h. +	$173.71	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	$942.17	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	$3,338.88	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	$0.00	
8b. Interest and dividends	8b.	$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive. Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	$0.00	
8d. Unemployment compensation	8d.	$0.00	
8e. Social Security	8e.	$0.00	
8f. Other government assistance that you regularly receive. Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	$0.00	
8g. Pension or retirement income	8g.	$0.00	
8h. Other monthly income. Specify:	8h. +	$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	$0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	$3,338.88 +	= $3,338.88

11. State all other regular contributions to the expenses that you list in Schedule J.
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: ______ 11. + $0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies. 12. $3,338.88

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

☑ No.
☐ Yes. Explain:

None.

Debtor 1 **LaMonica** **Bene** **McCray** Case number (if known) **15-33582-H4-13**
First Name Middle Name Last Name

5h. Other Payroll Deductions (details)	For Debtor 1	For Debtor 2 or non-filing spouse
STD	$8.52	
Aflac Accid	$50.31	
Aflac Can	$33.02	
Aflac Sp Serv	$31.85	
HSA Contr	$50.01	
Totals:	$173.71	

Fill in this information to identify your case:

Debtor 1: **LaMonica** (First Name) **Bene** (Middle Name) **McCray** (Last Name)

Debtor 2 (Spouse, if filing): First Name / Middle Name / Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**

Case number (if known): **15-33582-H4-13**

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date: ____________ MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☑ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
  - ☐ No
  - ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☑ Yes. Fill out this information for each dependent...................

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Son	23	☐ No ☑ Yes
Grandchild	5	☐ No ☑ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☑ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

		Your expenses
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	4.	
If not included in line 4:		
4a. Real estate taxes	4a.	
4b. Property, homeowner's, or renter's insurance	4b.	
4c. Home maintenance, repair, and upkeep expenses	4c.	$100.00
4d. Homeowner's association or condominium dues	4d.	

Debtor 1 **LaMonica** (First Name) **Bene** (Middle Name) **McCray** (Last Name) Case number (if known) **15-33582-H4-13**

			Your expenses
5.	**Additional mortgage payments for your residence,** such as home equity loans	5.	
6.	**Utilities:**		
	6a. Electricity, heat, natural gas	6a.	**$220.00**
	6b. Water, sewer, garbage collection	6b.	**$80.00**
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	**$250.00**
	6d. Other. Specify:	6d.	
7.	**Food and housekeeping supplies**	7.	**$550.00**
8.	**Childcare and children's education costs**	8.	
9.	**Clothing, laundry, and dry cleaning**	9.	**$120.00**
10.	**Personal care products and services**	10.	**$100.00**
11.	**Medical and dental expenses**	11.	**$75.00**
12.	**Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	**$180.00**
13.	**Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	**$100.00**
14.	**Charitable contributions and religious donations**	14.	**$100.00**
15.	**Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	**$100.00**
	15d. Other insurance. Specify:	15d.	
16.	**Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	**Installment or lease payments:**		
	17a. Car payments for Vehicle 1	17a.	
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c.	
	17d. Other. Specify:	17d.	
18.	**Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).**	18.	
19.	**Other payments you make to support others who do not live with you.** Specify:	19.	
20.	**Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**		
	20a. Mortgages on other property	20a.	
	20b. Real estate taxes	20b.	
	20c. Property, homeowner's, or renter's insurance	20c.	
	20d. Maintenance, repair, and upkeep expenses	20d.	
	20e. Homeowner's association or condominium dues	20e.	

Debtor 1 **LaMonica** (First Name) **Bene** (Middle Name) **McCray** (Last Name) Case number (if known) **15-33582-H4-13**

21. Other. Specify: **Emergency Savings Fund**	21.	+ **$50.00**
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22.	**$2,025.00**
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	**$3,338.88**
23b. Copy your monthly expenses from line 22 above.	23b.	– **$2,025.00**
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	**$1,313.88**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

- ☑ No.
- ☐ Yes. Explain here:
  None.

B 6 Summary (Official Form 6 - Summary) (12/14)

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**

Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	$101,034.00		
B - Personal Property	Yes	6	$27,615.50		
C - Property Claimed as Exempt	Yes	4			
D - Creditors Holding Secured Claims	Yes	1		$75,133.39	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		$4,618.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		$31,871.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			$3,338.88
J - Current Expenditures of Individual Debtor(s)	Yes	3			$2,025.00
	TOTAL	25	$128,649.50	$111,622.39	

B 6 Summary (Official Form 6 - Summary) (12/14)

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**

Chapter **13**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	**$0.00**
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	**$800.00**
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	**$0.00**
Student Loan Obligations (from Schedule F)	**$0.00**
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	**$0.00**
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	**$0.00**
TOTAL	**$800.00**

State the following:

Average Income (from Schedule I, Line 12)	**$3,338.88**
Average Expenses (from Schedule J, Line 22)	**$2,025.00**
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	**$4,467.43**

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		**$141.50**
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	**$4,618.00**	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		**$0.00**
4. Total from Schedule F		**$31,871.00**
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		**$32,012.50**

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **LaMonica Bene McCray** Case No. **15-33582-H4-13**
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **27** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **7/13/2015** Signature **/s/ LaMonica Bene McCray**
LaMonica Bene McCray

Date ______ Signature ______

[If joint case, both spouses must sign.]

Penalty for making a false statement or concealing property: Fine of up to $500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.